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1. PLACE OF BIRTH	ARIZONA STATE B BUREAU OF VIT STANDARD CERTII	TAL STATISTICS	State File No. 1571 Local Registrar's No. 167
County Leve	BIANDARD CERTI	FIGATE OF BIRTH	-
	***************************************	State	
District or Township	1 11	or Village	
2. Full name of child BUOK	Urbirth occurred in	herital or institution, give	St. Ward its NAME instead of street and number [If child is not yet named, make
3. Sex of Child To be answered Of its event of plural	Y.Y 1. Twin, triplet or oil	ner 6. Festimate?	7. Date Maria report, as directed.
ferrality.	5. No., in order of bir	the first	of birth Monetif Day , Year
Full rights have	Marial	Full mailen manage	MOTHER COLLEGE
9. Posidence (Usual place of about 1	solm of	15. Residence (Usual place)	John .
If non-resident, give place and state		If non-resident, give	place and state.
White 11, Age	at last birthder (Years)	white	7. Age/at/ast birthday (Years)
12. Birthplace (city or place)	ricora	18. Birthplace (city	Jelly .
(State or country)	2000	(State or country	Mas
13. Occupation Hug	RACIO	19. Occupation Nature of industry	unlife
20. Number of children of this moth	l (m) parm miller	and now living	21. Were precautions taken against oph-
(Taken as of time of birth of child learning this child.)	ierein (b) Born alive	but now dead . C	ibalmia neonatorum?
	CERTIFICATE OF ATTENDIT	NG PHYSICIAN OR MIDWIN	11 14
I hereby certify that I attended the *When there was no attending phy or midwife, then the father, househ etc., should make this return. A sli child is one that neither breather shows other evidence of life after	sician older, liborn nor	(Born all for stillings.)	further stated.
Given name added from		1 fa	(Physician promiderite).
Month, d	Ry, year		4
Regis	irar .	Jay 18, 1029	MI JOHN Registrar
·	1/9 -5//-2/5*/	•	

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MARGIN RESERVED FOR BINDING AINLY WITH UNFADING INK—THIS IS A PERMANENT RECORI